## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

03/31/2005

TROXELL LAW OFFICE PLLC **SUITE 1404** 5205 LEESBURG PIKE FALLS CHURCH, VA 22041 05/12/2005 MBEYENE2 00000170 501874

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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name (Signature (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/790,077	03/02/2004	Śhyan-Wei Chen			3095-131	2538
TITLE OF INVENTION: F	ACEMASK HARNESS		•			
·			• .			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE ,		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700 '		\$0	\$700	06/30/2005
EXAMINER		ART UN	VIT TIN	CLASS-SUBCLASS		
LINDSEY, RODNEY M		3765	, .;	002-069000	•	
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON</li> </ol>			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless		ow, no assignee	data will apr	pear on the patent. If an assign	ee is identified below, the	locument has been filed for
(A) NAME OF ASSIGN	IEE	(E	3) RESIDENO	CE: (CITY and STATE OR CO	UNTRY)	
Please check the appropriate	e assignee category or categori	es (will not be pr	rinted on the p	oatent): 🔲 Individual 🖵 Co	orporation or other private gr	oup entity Government
a. The following fee(s) are enclosed:			4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Diposit Account Number 501874 (enclose an extra copy of this form).			
a. Applicant claims S	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.		cant is no longer claiming SMA		(0)()
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issue Publication Fee (if required) wi ords of the United States Pater	Fee and Publica ill not be accepted at and Trademark	ition Fee (if and from anyon to Office.	ny) or to re-apply any previousle other than the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Authorized Signature

Typed or printed name Bruce H.

Date May 9, 2005

Registration No. 26, 592

Attorney Docket No.: 3095-131

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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**Applicant** 

**CHEN** 

Application No F E Vo

10/790,077

Filed

March 2, 2004

Title

FACEMASK HARNESS

Group Art Unit

3765

Examiner

R. Lindsey

Docket No.

3095-131

## MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## TRANSMITTAL COVER SHEET

Sir:

Transmitted herewith for filing are the following:

1. Part B - Fee(s) Transmittal Form (in duplicate) along with authorization to charge Deposit Account No. 501874 in the amount of \$700 to cover the Small Entity Issue Fee.

The Commissioner is hereby authorized to charge any additional fees which may be required for the filing of this document to **Deposit Account No. 501874**.

Respectfully submitted,

Date: May 9, 2005

By:

Bruce H. Troxell Reg. No. 26,592

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